

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Number:: 10/070,439
Application Date:: 05/30/02
Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE
Title:: PPAR α AND PPAR γ INHIBITORS
Attorney Docket Number:: 220902US0PCT

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Koji
Family Name:: MURAKAMI
City of Residence:: Tochigi
Country of Residence:: Japan
Street of Mailing Address:: Prescene-Nogi-Highrise 704, 386-2,
Marubayashi, Nogi-machi, Shimotsuga-
gun
City of Mailing Address:: Tochigi
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 329-0111

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Tomohiro
Family Name:: IDE
City of Residence:: Ibaragi
Country of Residence:: Japan
Street of Mailing Address:: Lions Mansion 407, 2-1, Honcho 1-
chome, Koga-shi
City of Mailing Address:: Ibaragi
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 306-0023

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Toshiro
Family Name:: MOCHIZUKI
City of Residence:: Saitama
Country of Residence:: Japan
Street of Mailing Address:: 304, 7-2, Sakurada 3-chome, Washimiya-machi, Kitakatsusika-gun
City of Mailing Address:: Saitama
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 340-0203

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Takashi
Family Name:: KADOWAKI
City of Residence:: Kanagawa
Country of Residence:: Japan
Street of Mailing Address:: 16-14, Katahira 3-chome, Aso-ku, Kawasaki-shi
City of Mailing Address:: Kanagawa
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 215-0023

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
<u>This Application</u>	<u>National Stage of</u>	<u>PCT/JP99/05217</u>	<u>09/24/99</u>

ASSIGNMENT INFORMATION

Assignee Name:: Kyorin Pharmaceuticals Co., Ltd.
Street of Mailing Address:: 5, Kanda Surugadai 2-chome, Chiyoda-ku
City of Mailing Address:: Tokyo

Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 101-0062